

JC987 U.S. PTO
01/09/01

01-10 01

Date of Deposit: 1/9/2001

PTO/SB/05 (11-00)

Approved for use through 10/31/2002 OMB 0651-0032

U.S. Patent and Trademark Office, U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

UTILITY
PATENT APPLICATION
TRANSMITTAL

(Only for new nonprovisional applications under 37 CFR 1.53(b))

Attorney Docket No. 286308-00001

First Inventor Mark Schavone

Title Compressed Gas Powered Gun Simulating
The Recoil of a Conventional Firearm

Express Mail Label No. EL70152773US

APPLICATION ELEMENTS

See MPEP chapter 600 concerning utility patent application contents

1. Fee Transmittal Form (e.g., PTO/SB/17)
(Submit an original and a duplicate for fee processing)
2. Applicant claims small entity status
See 37 CFR 1.27.
3. Specification [Total Pages 30]
(preferred arrangement set forth below)
 - Descriptive title of the invention
 - Cross Reference to Related Applications
 - Statement Regarding Fed sponsored R & D
 - Reference to sequence listing, a table, or a computer program listing appendix
 - Background of the Invention
 - Brief Summary of the Invention
 - Brief Description of the Drawings (if filed)
 - Detailed Description
 - Claim(s)
 - Abstract of the Disclosure
4. Drawing(s) (35 U.S.C. 113) [Total Sheets 23]
5. Oath or Declaration [Total Pages]
 a. Newly executed (original or copy)
 b. Copy from a prior application (37 CFR 1.63 (d))
 (for continuation/divisional with Box 18 completed)
 - i. **DELETION OF INVENTOR(S)**
Signed statement attached deleting inventor(s) named in the prior application see 37 CFR 1.63(d)(2) and 1.33(b)
6. Application Data Sheet See 37 CFR 1.76

ADDRESS TO: Assistant Commissioner for Patents
Box Patent Application
Washington, DC 20231

7. CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)
8. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary)
 - a. Computer Readable Form (CRF)
 - b. Specification Sequence Listing on:
 - i. CD-ROM or CD-R (2 copies); or
 - ii. paper
 - c. Statements verifying identity of above copies

ACCOMPANYING APPLICATION PARTS

9. Assignment Papers (cover sheet & document(s))
10. 37 CFR 3.73(b) Statement Power of Attorney
(when there is an assignee)
11. English Translation Document (if applicable)
12. Information Disclosure Statement (IDS)/PTO-1449 Copies of IDS Citations
13. Preliminary Amendment
14. Return Receipt Postcard (MPEP 503)
(Should be specifically itemized)
15. Certified Copy of Priority Document(s)
(if foreign priority is claimed)
16. Request and Certification under 35 U.S.C. 122 (b)(2)(B)(i) Applicant must attach form PTO/SB/35 or its equivalent
17. Other

18. If a CONTINUATING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76

Continuation Divisional Continuation-in-part (CIP) of prior application No. _____

Prior application information

Examiner _____

Group Art Unit _____

For CONTINUATION OR DIVISIONAL APPS only. The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts

19. CORRESPONDENCE ADDRESS

| | | | | |
|--|--|----------------------------------|--------------|--|
| <input type="checkbox"/> Customer Number or Bar Code Label | (Insert Customer No. or Attach Bar Code Label here) | | | <input checked="" type="checkbox"/> Correspondence address below |
| Name | William F. Lang, IV | | | |
| Address | Eckert Seamans Cherin & Mellott, LLC 600 Grant Street, 44th Floor | | | |
| City | Pittsburgh | State | PA | Zip Code 15219 |
| Country | US | Telephone | 412/566-2024 | Fax 412/566-6099 |
| Name (Print/Type) | William F. Lang, IV | Registration No (Attorney/Agent) | 41,928 | |
| Signature | William F. Lang, IV | Date | 1/9/2001 | |

Burden Hour Statement. This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO Assistant Commissioner for Patents, Box Patent Application, Washington, DC 20231.

Date of Deposit: 1/8/2001
Express Mail No. EL70152773US

PTO/SB/17 (11-00)

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FEE TRANSMITTAL for FY 2001

Patent fees are subject to annual revision.

TOTAL AMOUNT OF PAYMENT (\$ 652.00)

Complete if Known

| | |
|----------------------|---------------|
| Application Number | |
| Filing Date | |
| First Named Inventor | Mark Schavone |
| Examiner Name | |
| Group Art Unit | |
| Attorney Docket No. | 286308-00001 |

METHOD OF PAYMENT

1. The Commissioner is hereby authorized to charge indicated fees and credit any overpayments to
Deposit Account Number **02-2556**
Deposit Account Name **Eckert Seamans**

Charge Any Additional Fee Required and credit any overpayment Under 37 CFR 1.16 and 1.17

Applicant claims small entity status See 37 CFR 1.27

2. Payment Enclosed:
 Check Credit card Money Order Other

FEE CALCULATION (continued)

3. ADDITIONAL FEES

| Large Entity Fee Code (\$) | Small Entity Fee Code (\$) | Fee (\$) | Fee Description | Fee Paid |
|-------------------------------|-------------------------------|-------------|---|----------|
| 105 | 130 | 205 | 65 Surcharge - late filing fee or oath | |
| 127 | 50 | 227 | 25 Surcharge - late provisional filing fee or cover sheet | |
| 139 | 130 | 139 | 130 Non-English specification | |
| 147 | 2,520 | 147 | 2,520 For filing a request for ex parte reexamination | |
| 112 | 920* | 112 | 920* Requesting publication of SIR prior to Examiner action | |
| 113 | 1,840* | 113 | 1,840* Requesting publication of SIR after Examiner action | |
| 115 | 110 | 215 | 55 Extension for reply within first month | |
| 116 | 390 | 216 | 195 Extension for reply within second month | |
| 117 | 890 | 217 | 445 Extension for reply within third month | |
| 118 | 1,390 | 218 | 695 Extension for reply within fourth month | |
| 128 | 1,890 | 228 | 945 Extension for reply within fifth month | |
| 119 | 310 | 219 | 155 Notice of Appeal | |
| 120 | 310 | 220 | 155 Filing a brief in support of an appeal | |
| 121 | 270 | 221 | 135 Request for oral hearing | |
| 138 | 1,510 | 138 | 1,510 Petition to institute a public use proceeding | |
| 140 | 110 | 240 | 55 Petition to revive - unavoidable | |
| 141 | 1,240 | 241 | 620 Petition to revive - unintentional | |
| 142 | 1,240 | 242 | 620 Utility issue fee (or reissue) | |
| 143 | 440 | 243 | 220 Design issue fee | |
| 144 | 600 | 244 | 300 Plant issue fee | |
| 122 | 130 | 122 | 130 Petitions to the Commissioner | |
| 123 | 130 | 123 | 130 Petitions related to provisional applications | |
| 126 | 180 | 126 | 180 Submission of Information Disclosure Stmt | |
| 581 | 40 | 581 | 40 Recording each patent assignment per property (times number of properties) | |
| 146 | 710 | 246 | 355 Filing a submission after final rejection (37 CFR § 1.129(a)) | |
| 149 | 710 | 249 | 355 For each additional invention to be examined (37 CFR § 1.129(b)) | |
| 179 | 710 | 279 | 355 Request for Continued Examination (RCE) | |
| 169 | 900 | 169 | 900 Request for expedited examination of a design application | |
| Other fee (specify) _____ | | | | |

SUBTOTAL (1) (\$ 355.00)

2. EXTRA CLAIM FEES

| Total Claims | Extra Claims | Fee from below | Fee Paid |
|--------------------|--------------|----------------|----------|
| 53 | -20** = 33 | x 9 | = 297 |
| Independent Claims | 3 | -3** = 0 | x 0 = 0 |
| Multiple Dependent | | 0 | = 0 |

| Large Entity Fee Code (\$) | Small Entity Fee Code (\$) | Fee Description |
|-------------------------------|-------------------------------|--|
| 103 | 18 | 203 9 Claims in excess of 20 |
| 102 | 80 | 202 40 Independent claims in excess of 3 |
| 104 | 270 | 204 135 Multiple dependent claim, if not paid |
| 109 | 80 | 209 40 ** Reissue independent claims over original patent |
| 110 | 18 | 210 9 ** Reissue claims in excess of 20 and over original patent |

SUBTOTAL (2) (\$ 297)

**or number previously paid, if greater; For Reissues, see above

*Reduced by Basic Filing Fee Paid

SUBTOTAL (3) (\$)

SUBMITTED BY

Complete (if applicable)

| | | | | | |
|-------------------|---------------------|----------------------------------|--------|-----------|--------------|
| Name (Print/Type) | William F. Lang, IV | Registration No (Attorney/Agent) | 41,928 | Telephone | 412/566-2024 |
| Signature | William F. Lang, IV | | | Date | 1/9/2001 |

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

Burden Hour Statement. This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.